PTO/SB/06 (07-06)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/589,250			ing Date 14/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN
$\vdash$	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$) FEE (\$)		OR	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),		N/A	ED N	N/A	ı	N/A	TEE (a)	l	N/A	TEE (0)
П	SEARCH FEE	01 (0)/	N/A	<u> </u>	N/A	ı	N/A		ı	N/A	
	(37 CFR 1.16(k), (i), EXAMINATION FE	Ε	N/A	_	N/A		N/A		ı	N/A	
	(37 CFR 1.16(o), (p), FAL CLAIMS	or (q))	minus 20 = *				x \$ =		OR	x s =	
	CFR 1.16(i)) EPENDENT CLAIM	S				ı			OK		
	CFR 1.16(h))		minus 3 =			ı	x \$ =			x \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and draw sheets of paper, the applica is \$250 (\$125 for small entit additional 50 sheets or fract 35 U.S.C. 41(a)(1)(G) and 3		ion size fee due r) for each on thereof. See						
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	06/05/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18())	· 20	Minus	<b></b> 20	= 0		X \$26 =	0	OR	x s =	
z	Independent (37 CFR 1.16(h))	• 2	Minus	<b></b> 3	= 0	l	X \$110 =	0	OR	x s =	
Ž	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
z	Total (37 CFR 1.1801)		Minus		=	i	x \$ =		OR	x s =	
AMENDMENT	Independent (37 CFR 1/16(h))		Minus	***		l	x \$ =		OR	x \$ =	
I I	Application S	ize Fee (37 CFR 1	.16(s))						1		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
Г									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is leas than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "2".  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "I THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "I THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "I THIS SPACE is less than 3, enter "3".											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public within is in fel (and by the USFTO to process) an application. Confidentiality is govered by 80 USS -0.12 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1490, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissionment of Commerce P.O. Box 1490, Alexandris VA 22313-1450.